

PRINTED: 08/14/2015  
FORM APPROVED

## Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  HAL085001	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01  B. WING: _____	(X3) DATE SURVEY COMPLETED  07/23/2015
NAME OF PROVIDER OR SUPPLIER  GRACELAND LIVING CENTER I		STREET ADDRESS, CITY, STATE, ZIP CODE 1290 DENNY ROAD KING, NC 27021		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
C 000	Initial Comments  This report is of a Biennial Construction Survey done by Bob Getchell and Dennis Harrell on July 23, 2015.  This facility was first licensed or submitted as a Home for the Aged serving 12 residents on April 8, 1980. Therefore the facility must meet the 1977 and the applicable components of the 2005 Rules for the Licensing of Adult Care Homes, and, the 1978 North Carolina State Building Code, section 409.1 - Institutional Unrestrained Occupancy.  Deficiencies were noted which will require a plan of correction.	C 000	CONSTRUCTION SECTION AUG 28 2015 see Attached letter only Included page 1 of 7 (see file copy)	
C 101	Existing Licensed Fac- No less than '71 Rules  SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0301 APPLICATION OF PHYSICAL PLANT REQUIREMENTS The physical plant requirements for each adult care home shall be applied as follows: (2) Except where otherwise specified, existing licensed facilities or portions of existing licensed facilities shall meet licensure and code requirements in effect at the time of construction, change in service or bed count, addition, renovation, or alteration; however in no case shall the requirements for any licensed facility where no addition or renovation has been made, be less than those requirements found in the 1971 "Minimum and Desired Standards and Regulations" for "Homes for the Aged and Infirm", copies of which are available at the Division of Health Service Regulation, 701 Barbour Drive, Raleigh, North Carolina, 27603 at no cost;  This Rule is not met as evidenced by:	C 101		

Division of Health Service Regulation

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

STATE FORM

7WM521

If continuation sheet 1 of 7

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C 101	Continued From page 1  1. Based on observation, the facility fire alarm system was not installed in accordance with the Codes and Rules in effect at the time the facility was first licensed.  Findings include: None of the bathrooms on the main corridor or service corridor have smoke or heat detection	C 101		
C 126	Bedrooms-Windows  SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (d) The requirements for the bedroom are: (9) Each resident bedroom shall be ventilated with one or more windows which are maintained operable and well lighted. The window area shall be equivalent to at least eight percent of the floor space and be provided with insect screens. The window opening may be restricted to a six-inch opening to inhibit resident elopement or suicide. The windows shall be low enough to see outdoors from the bed and chair, with a maximum 36 inch sill height; and  This Rule is not met as evidenced by: 1. Based on observation, egress from all areas was not maintained in a safe manner by having bedroom windows that are stuck shut. This would affect the residents by not allowing free egress in an emergency.  Findings include: The windows are stuck shut or will not stay open in the following locations: a) Room 1, b) Room 2, c) Room 3, d) Room 4,	C 126		

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C 126	Continued From page 2 e) Room 5	C 126		
C 133	Bathrooms-Hand Grips  SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (e) The requirements for bathrooms and toilet rooms are: (6) Hand grips shall be installed at all commodes, tubs and showers used by or accessible to residents;  This Rule is not met as evidenced by: 1. Based on observation, the bathrooms were not maintained in a safe manner.  Findings include: The womens shower/bath near the Living Room has a loose hand grip at the tub	C 133		
C 150	Corridors-Free of equipment and Obstructions  SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (g) The requirements for corridors are: (4) Corridors shall be free of all equipment and other obstructions.  This Rule is not met as evidenced by: 1. Based on observation, the facility was not maintained in a safe manner by having corridors obstructed.  Findings include: a) The corridor is blocked on the right end by a mailbox which reduces the width to less than 6 feet	C 150		

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C 155	Floors-Non-skid, in Good Repair  SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (i) The requirements for floors are: (1) All floors shall be of smooth, non-skid material and so constructed as to be easily cleanable; (2) Scatter or throw rugs shall not be used; and (3) All floors shall be kept in good repair.  This Rule is not met as evidenced by: Based on observation, the floor in the corridor was not maintained safe.  Findings include: a) The floor tile is broken in the corridor near room 5, b) The carpet is frayed in the doorway of the Staff Apartment	C 155		
C 164	Housekeeping and Furnishings-Clean, Repaired  SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall: (1) have walls, ceilings, and floors or floor coverings kept clean and in good repair; (2) have no chronic unpleasant odors; (3) have furniture clean and in good repair; (e) This Rule shall apply to new and existing facilities.  This Rule is not met as evidenced by: 1. Based on observation, the resident furnishings in bedrooms and other areas were not maintained in good condition.	C 164		

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C 164	Continued From page 4  Findings include: a) Room 1 has furniture with handles loose/missing on the drawers. b) Room 3 has furniture with handles loose/missing on the drawers. c) Room 5 has furniture with handles loose/missing on the drawers. d) Room 6 has furniture with handles loose/missing on the drawers.	C 164		
C 189	Building Equipment Maintained Safe, Operating  SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (a) The building and all fire safety, electrical, mechanical, and plumbing equipment in an adult care home shall be maintained in a safe and operating condition. (k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities.  This Rule is not met as evidenced by: 1. Based on observation, the HVAC ducts in the attic were not maintained.  Findings include: There is an HVAC duct over the Living Room that has separated and is venting into the attic  2. Based on observation, the plumbing vents in the attic were not maintained.  Findings include: A vent pipe has a leak around it which has caused the surrounding sheathing to rot, and the pipe support beam to rot.	C 189		

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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

**GRACELAND LIVING CENTER I**

**1290 DENNY ROAD  
KING, NC 27021**

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C 189	<p>Continued From page 5</p> <p>3. Based on observation, the facility components were not maintained operable by having doors that did not close completely and latch.</p> <p>Findings include: The following doors have issues:</p> <ul style="list-style-type: none"> <li>a) Living Room door will not latch,</li> <li>b) Mens bathroom at room 2 has a loose door knob,</li> <li>c) Room 4 has a loose door knob</li> </ul> <p>4. Based on observation, the building electrical system was not maintained to keep the facility safe by allowing the use of two-wire extension cords and expansion blocks in the outlets. This would affect all residents by potentially overloading electrical circuits in the bedrooms.</p> <p>Findings include:</p> <p>Two-wire extension cords and outlet expansion devices were observed in the following locations:</p> <ul style="list-style-type: none"> <li>a) Staff Apartment has a two-wire extension cord and an outlet expansion device in use.</li> </ul> <p>5. Based on observation, the mechanical ventilation was not maintained operable.</p> <p>Findings include:</p> <ul style="list-style-type: none"> <li>a) Exhaust fan in the Staff Apartment bathroom is not working</li> </ul> <p>6. Based on observation, the building exit signage was not maintained in a safe manner. This would affect all residents by not keeping the exits visible in an emergency.</p> <p>Findings include:</p> <p>The Exit sign is not working in the Kitchen</p>	C 189		

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C 189	Continued From page 6  7. Based on observation the facility exterior building components were not maintained.  Findings include: a) The front left soffit is coming loose, b) The back left soffit is coming loose.	C 189		

**Tuttle & Associates**

1025 Lamb Road, Lexington, NC 27295  
336-853-7670 phone [Loftin@tclmc.net](mailto:Loftin@tclmc.net)  
336-853-7671 fax

CONSTRUCTION SECTION

AUG 28 2015

RECEIVED

August 28, 2015

NC Department of Health and Human Services  
Division of Health Services Regulation  
Construction Section  
Bob Gretchell  
2705 Mail Service Center  
Raleigh, NC 27699-2705

Ref: Graceland Living Center I - HAL085001 - FID #920449

Dear Mr. Gretchell:

I am writing this letter in response to your construction survey date of visit 7/23/2015.

**Prefix Tag - C101****Violation** - Fire Alarm detection in bathrooms**Correction** - at no time have heat detection been removed from the building. The fire alarm system will be evaluated for the addition of heat detection in the 5 bathrooms. → 09-28-15**Time Frame** - 30 days dependent on approval/inspection/permits, equipment order and installation.**Prefix Tag - C 126****Violation** - Windows**Correction** - All windows were repaired for correct operation for egress. Windows will be checked twice month for operation. The director will be responsible for compliance in this rule area. A handyman will be called for any repairs that rise to a level of need.**Time Frame** - 7/24/2015**Prefix Tag - C 133****Violation** - Loose Hand Grip**Correction** - The hand grip at the women's shower/bath was repaired. The director will check rails for safety once a month. A handyman will be called for any repairs that rise to a level of need.**Time Frame** - 7/24/2015**Prefix Tag - C150****Violation** - Obstruction in a part of the hall**Correction** - The mailbox was removed from the corridor. The director will check for obstructions and remove when necessary.**Time Frame** - 7/25/2015



● Page 2

August 28, 2015

**Prefix Tag – C-165**

**Violation** – a broken tile and frayed carpet

**Correction** – The tile and carpet was fixed

**Time Frame** – 8/3/2015

**Prefix Tag – C-164**

**Violation** – loose/missing handles

**Correction** – Repairs or replacements were made on the furniture

**Time Frame** – 8/3/2015

**Prefix Tag – C-189**

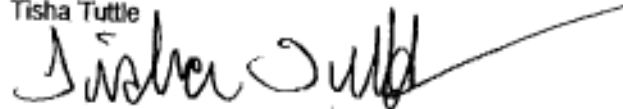
**Violation** – 1.&2.Attic pipe leaking, 3.door latches 4.use of extension cord, 5. exhaust fan 6. exit sign

**Correction** –1 &2. Handyman will repair the leak around the vent pipe . 3.The doors latches and knobs were repaired.4. electrical was corrected.4. fan was repaired/replaced. 6. Exit light was repaired/replaced 7. loose soft. The director will do a walk through monthly for repair work needs.

**Time Frame** –1&2 9/28/2015, 3,4,5,6 &7. Repaired/corrected on 8/3/2015,

Sincerely,

Tisha Tuttle

A handwritten signature in black ink, appearing to read 'Tisha Tuttle', with a long horizontal flourish extending to the right.

Administrator